

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09901363
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	3					
TOTAL DEP.	13	→	→	→		
TOTAL CLAIMS	16	SEARCHED	EXAMINED	SEARCHED		

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		→		→		→
TOTAL CLAIMS	16	SEARCHED	EXAMINED	SEARCHED		

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS